

Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL FOR FY 2005

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT**

(\$0)

*Complete if Known*

Application Number

10/539,688

Filing Date

June 16, 2005

First Named Inventor

Luciano Salice

Examiner Name

Mark A. Williams

Art Unit

3676

Attorney Docket No.

27419/260 (4565PTUS/er)

## METHOD OF PAYMENT (check all that apply)

Check     Credit Card     Money Order     None     Other (please identify): \_\_\_\_\_

Deposit Account    Deposit Account Number: \_\_\_\_\_ 14-1138    Deposit Account Name: Nixon Peabody LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below     Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17     Credit any overpayments

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## FEE CALCULATION

### 1. BASIC FILING, SEARCH AND EXAMINATION FEES

#### FILING FEES

#### SEARCH FEES

#### EXAMINATION FEES

<u>Application Type</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

### 2. EXCESS CLAIM FEES

#### Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Small Entity Fee (\$)

50      25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200      100

Multiple dependent claims

360      180

#### Total Claims

Extra Claims      Fee (\$)      Fee Paid (\$)

#### Multiple Dependent Claims

Fee (\$)      Fee Paid (\$)

13

- 20 =

0

x

\$25

=

\$0

\$180

\$0

HP = highest number of total claims paid for, if greater than 20

Indep. Claims      Extra Claims      Fee (\$)      Fee Paid (\$)

3      - 3 =      0      x      \$100      =      \$0

HP = highest number of independent claims paid for, if greater than 3

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets      Extra Sheets      Number of each additional 50 or fraction thereof      Fee (\$)      Fee Paid (\$)

\_\_\_\_\_ - 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

### 4. OTHER FEE(S)

Non-English Specification,      \$130 fee (no small entity discount)

Other: \_\_\_\_\_

Fees Paid (\$)

## SUBMITTED BY

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Name (Print/Type)	Gunnar G. Leinberg		Date October 2, 2006

## CERTIFICATE OF MAILING OR TRANSMISSION [35 CFR 1.8(a)]

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to: Mail Stop \_\_\_\_\_, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or being facsimile transmitted to the USPTO at \_\_\_\_\_, on \_\_\_\_\_.

Signature: \_\_\_\_\_

Name: \_\_\_\_\_